Transbehavioral Outcomes Assessment

Interim Co~Chairs ...

Trish Jordan, Behavior Change Consortium (via University of Rhode Island) **Marcia Ory**, Texas A&M University System (via NIH/NIA)

Key Members ...

Steve Belle, University of Pennsylvania (workgroup consultant); **Russ Glasgow**, Kaiser Permanente Denver Co. (ORI); **Abby King**, Stanford University; **Lisa Klesges**, University of Tennessee; **Claudio Nigg**, University of Hawai'i at Manoa (URI); **Karen Peterson**, Harvard School of Public Health; **Jim Prochaska**, University of Rhode Island; **Geof Williams**, University of Rochester

Mission ...

To examine whether a meaningful transbehavioral outcomes assessment can be developed to permit comparisons across various behaviors, interventions and populations.

Specific Aims ...

[•] To develop and examine transbehavioral indices or assessment methods (such as a behavior change index) to be used in behavior change research regardless of the behavior being addressed.

Major Highlights ...

- [•] The TBOA workgroup held a pre-meeting workshop on July 17, 2002 to: a) identify the importance and rationale for what the BCC is doing to examine intervention mediators and outcomes across populations and behaviors; b) present a framework for examining these issues; c) address the pros and cons of various approaches; seek feedback from outside consultants; and d) propose at least one concrete assessment tool to use in cross-site comparisons.
- [•] The workgroup obtained supplementary funding from NIH/OBSSR, a portion of which went to hosting the workshop.
- [•] 19 invited members of the BCC and NIH, and four expert consultants (Steve Belle, University of Pennsylvania; Peter Briss, Centers for Disease Control and Prevention; Helena Kraemer, Stanford University; Robert Kaplan, University of California, San Diego) attended the workshop to discuss a position paper, prepared by Claudio Nigg, Ph.D., with input from other workgroup members. Based on several preliminary discussions prior to the workshop, the workgroup presented nine possible approaches, which fell into three categories: Behavioral Outcomes; Population Impact; and Clinical Interpretations.
- [•] Following the meeting, a Final Summary Report was prepared and included an executive summary of the workshop's discussion, recommendations for future work in this area; feedback statements from each of the four outside consultants, a bibliography, and a complete set of minutes included as an appendix. The Report was distributed online, and is now available on the BCC website.

Collaborative Strategies ...

- [•] The workgroup held some conference calls with core members, but was most successful in generating ideas and producing materials at the bi-annual BCC meetings.
- [•] The workgroup was fluid in its membership, and enjoyed a number of varied perspectives and opinions from individuals with a wide range of expertise.
- [•] The workgroup utilized the collective expertise of the BCC membership, as well as outside consultants when necessary, to specify its aims, goals, and strategies.

Future Directions ...

All attendees agreed that the workshop was worthwhile, and the intellectual exercise was challenging. However, most concluded that this endeavor was slightly ahead of the field, and that we would need to solicit more feedback from outside sources. Ongoing funding to support this initiative was also not easily resolved, nor was the questions of human resources once the BCC officially disbanded in Spring, 2003.

It was agreed that the workgroup members would carefully review the recommendations and feedback provided by the outside consultants. The workgroup would continue to meet via conference call to discuss and define future direction(s) before advising NIH program staff and other BCC members about plans to proceed.

Suggested Cross-Site Activities ...

- [•] Charging various workgroups with the task of analyzing one or more of the suggested approaches. The results will be written up individually, and the collective manuscripts will be published as a special issue of (for example) *Annals of Behavioral Medicine*.
- Sponsor a small conference to highlight the BCC's agenda in this area.
- [•] Approach this question as a multi-site prevalence study. Obtain consensus on a continuous measure of behavior change from each workgroup, and produce a "Multibehavioral Prevalence Index Across Populations."
- [•] Further exploring this issue with other behavioral scientists as a symposium at the Society of Behavioral Medicine's annual meeting.